

FIG. 1

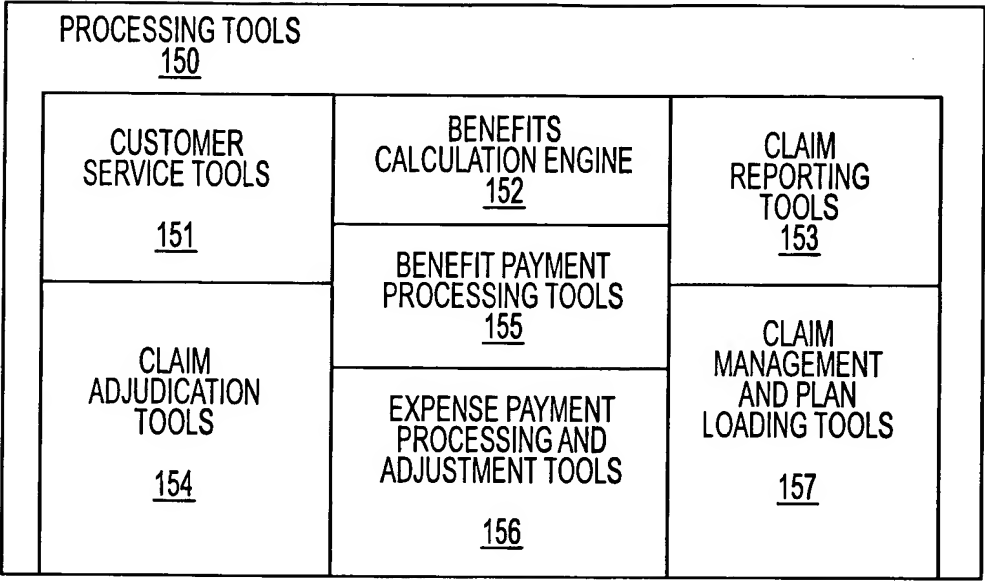


FIG. 2

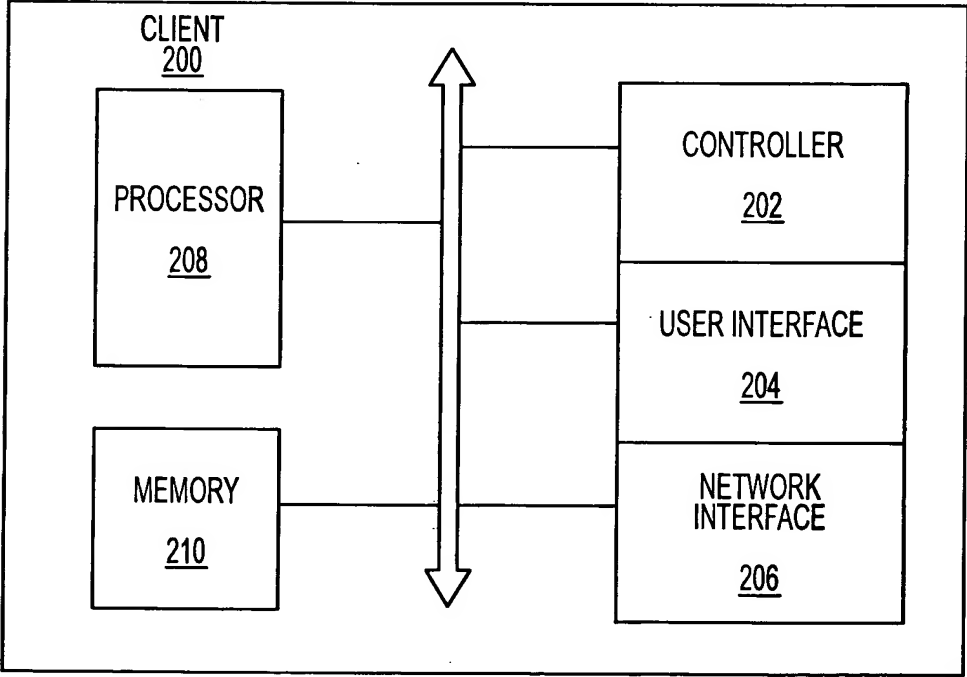


FIG. 3

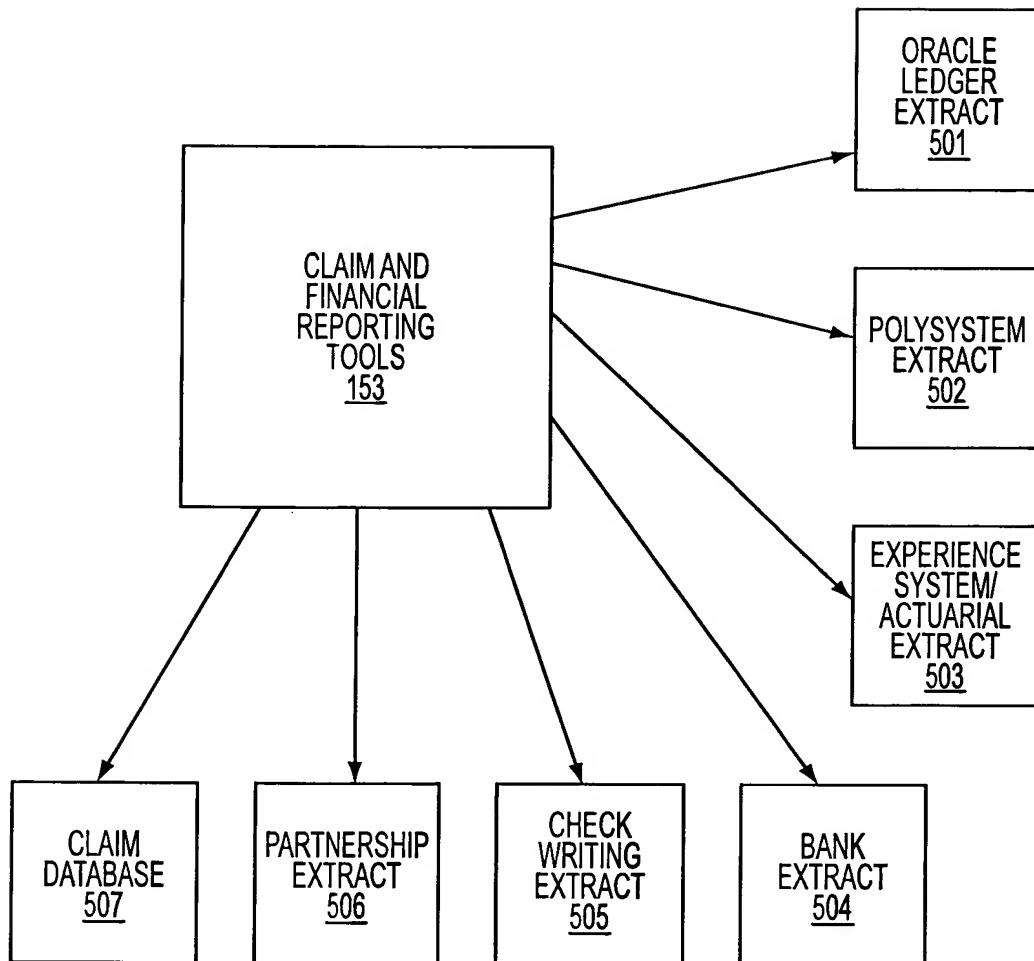


FIG. 4

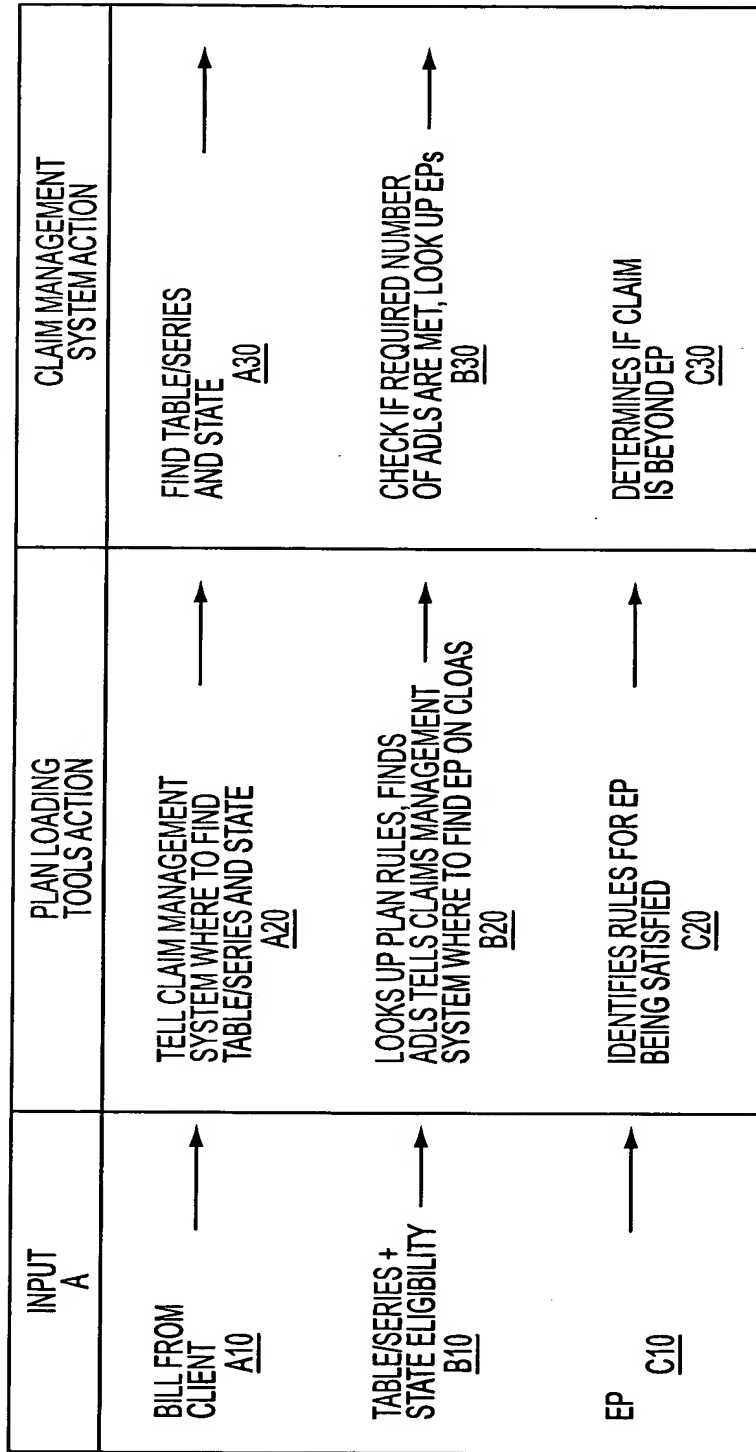


FIG. 5

INPUT	PLAN LOADING TOOLS ACTION	CLAIM MANAGEMENT SYSTEM ACTION
TABLE/SERIES AND STATE <u>A100</u>	LOOK UP COVERAGE FOR: REIMBURSEMENT, BIO, BENEFITS, NON-DUP/COORD. RULES <u>A110</u>	MATCH SERVICES WITH COVERED BENEFITS AND PLAN OF CARE, BENEFITS PAID BY MEDICARE <u>A120</u>
BENEFITS OK'd <u>B100</u>	FIND SPECIAL LIMITS AND %s TELLS SYSTEM WHERE TO FIND COVERAGE LIMITS <u>B110</u>	RETRIEVES COVERAGE LIMITS FROM CLOAS <u>B120</u>
LIMITS AND PERCENTAGES <u>C100</u>	SPECIFY RULES FOR USING LIMITS, PERCENTAGES <u>C110</u>	APPLY LIMITS AND %s TO COVERED BENEFITS <u>C120</u>
PAYABLE AMOUNT <u>D100</u>		DISPLAY AMOUNT <u>D110</u>

FIG. 6

10

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

MAXIMUM CALCULATION

11

Type

Coverage

12

Unit

Dollars

14

Per

Service

16

LIMIT

Policy

18

Multiplier

20

COVERAGE.ORIGINAL_BENEFIT_AMT

22

COVERAGE.MAX_DAYS_PAYABLE

24

BIO Type

None

BIO Compounding Period

26

BIO Interest

28

BIO Max Age

30

BIO on Remaining Balance

Add to Nursing Home Days

Claim Max Exceeded

Not counted in period

Save

Close

FIG. 7

10

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEH

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula Begin Date End Date

Description

STEP

Section Step Section Step Seq

MAXIMUM CALCULATION

Type Unit Per

LIMIT

☐ Non-Multiplier

BIO Type BIO Compounding Period

BIO Interest BIO Max Period BIO Max Age

☐ BIO on Remaining Balance ☐ Add to Nursing Home Days ☐ Claim Max Exceeded ☐ Not counted in period Max

Save

Close

FIG. 8

"INSURANCE INFORMATION MANAGEMENT SYSTEM AND METHOD"

Applicant: David HANSON et al.
Continuation of USAN 10/279,983
Attorney Docket No.: 52493.000343

10

STEPS		Formula		Begin Date		End Date	
3DAYHOSP 01/01/2000		ABC		2000			
ABC 01/10/2000		Standard Testing					
Primary		Section		Step		Section Step Seq	
PCT		Primary		Max		4	
PWHEEN							
EP							
MAX							
MAX							
TOT							
Standard							
ACF50CA_C 01/01/2000							
ACF50CA_S 01/01/2000							
ACF60 01/01/2000							
ACF60_C 01/01/2000							
ACF60_S 01/01/2000							
ACF60CA 01/01/2000							
ACF60CA_C 01/01/2000							
ACF60CA_S 01/01/2000							
ACF7002 01/01/2000							
ACF7002_C 01/01/2000							
ACF7002_S 01/01/2000							
ACF80 01/01/2000							
ACF80_C 01/01/2000							
ACF80_S 01/01/2000							
ACF80CUSTOM 01/01/2000							
ACF80CUSTOM_C 01/01/2000							
ACF80CUSTOM_S 01/01/2000							
ACF80MN 01/01/2000							
ACF80MN_C 01/01/2000							
ACF80MN_S 01/01/2000							
ACFCA_C 01/01/2000							
ACFCA_S 01/01/2000							
ACFREIMB 01/01/2000							
ACFREIMB_C 01/01/2000							
ACFREIMB_S 01/01/2000							
ADC50000 01/01/2000							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							
BIO Compounding Period							
BIO Max Period							
BIO Max Age							
Add to Nursing Home Days							
Claim Max Exceeded							
Not counted in period							
Max							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
Non-Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type							
BIO Interest							

10

Plan Load	STEPS	Formula	Begin Date	End Date
	3DAYHOSP 01/01/2000	ABC	2000	
	ABC 01/10/2000			
	Primary			
	PCT			
	PWHEN			
	EP			
	MAX			
	MAX			
	MAX			
	TOT			
	Standard			
	ACF50CA_C 01/01/2000			
	ACF50CA_S 01/01/2000			
	ACF60 01/01/2000			
	ACF60_C 01/01/2000			
	ACF60_S 01/01/2000			
	ACF60CA 01/01/2000			
	ACF60CA_C 01/01/2000			
	ACF60CA_S 01/01/2000			
	ACF7002 01/01/2000			
	ACF7002_C 01/01/2000			
	ACF7002_S 01/01/2000			
	ACF80 01/01/2000			
	ACF80_C 01/01/2000			
	ACF80_S 01/01/2000			
	ACF80CUSTOM 01/01/2000			
	ACF80CUSTOM_C 01/01/2000			
	ACF80CUSTOM_S 01/01/2000			
	ACF80MN 01/01/2000			
	ACF80MN_C 01/01/2000			
	ACF80MN_S 01/01/2000			
	ACFCA_C 01/01/2000			
	ACFCA_S 01/01/2000			
	ACFREIMB 01/01/2000			
	ACFREIMB_C 01/01/2000			
	ACFREIMB_S 01/01/2000			
	ADC50000 01/01/2000			

STEP	Description	Section	Step	Max	Section Step Seq
	Standard Testing	Primary			4

Type	Coverage	Unit	Dollars	Per Service
LIMIT				16
Non-Multiplier				
Multiplier				
COVERAGE.ORIGINAL_BENEFIT_AMT				
COVERAGE.PRIMARY_SPOUSE				
COVERAGE.RISK_COMMENCED_DATE				
ELIGIBILITY.COGL_IMPAIRMENT_IND				
ELIGIBILITY.COGL_TEST_SCORE				
ELIGIBILITY.COMPLEX_MED_CONDITION_IN				
ELIGIBILITY.FUNCTION_INCAPACITY_IND				
ELIGIBILITY.MED_NECESSITY_IND				

COVERAGE	MAX_DAYS_PAYABLE
	20
	24
	28
	30

BIO On Remaining Balance	Add To Nursing Home Days	Claim Max Exceeded	Not counted in period

Save	Close

FIG. 10

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula ABC

Begin Date 2000

End Date

Description Standard Testing

STEP

Section Primary

Step Max

Section Step Seq 4

MAXIMUM CALCULATION

Type Coverage

Unit Dollars

Per Service

LIMIT

☐ Non-Multiplier

☒ Multiplier

COVERAGE.ORIGINAL_BENEFIT_AMT

*

COVERAGE.MAX_DAYS_PAYABLE

BIO Type Compound

BIO Compounding Period

BIO Interest None Simple Compound

BIO On Remaining Balance

Add To Nursing Home Days

Claim Max Exceeded

Not counted in period

BIO Max Age

Max

26

22

24

28

30

12

14

16

18

20

Save

Close

FIG. 11

10

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA 01/01/2000

ACFCA_C 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

MAXIMUM CALCULATION

Type

Coverage

Unit

Dollars

Per

Service

LIMIT

Non-Multiplier

Multiplier

COVERAGE.ORIGINAL_BENEFIT_AMT

COVERAGE.MAX_DAYS_PAYABLE

BIO Type

Compound

BIO Compounding Period

BIO Interest

5%

BIO Max Period

28

BIO Max Age

30

BIO On Remaining Balance

Add To Nursing Home Days

Claim Max Exceeded

Not counted in period

Max

Save

Close

FIG. 12

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula Begin Date End Date

Description

STEP

Section Step Section Step Seq

MAXIMUM CALCULATION

Type Unit Per

LIMIT

☒ Non-Multiplier

☐ Multiplier

BIO Type BIO Compounding Period

BIO Interest BIO Max Period

BIO Max Age

BIO On Remaining Balance ☐

Add To Nursing Home Days ☐

Claim Max Exceeded ☐

Not counted in period Max ☐

Save

Close

FIG. 13

Plan Load

Plans

Formulas

Steps

STEPS

ABC 01/10/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA 01/01/2000

ACFCA_C 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

ELIMINATION PERIOD

Type

Coverage

Policy

Coverage

Benefit

Limit

N

Benefit

Coverage.ELIM_PERIOD

Per

Claim

Accumulates Toward

46

Satisfaction Period

Simple

Calculation

Coverage.Elim_Period

+

Claim_Cov.Hospital_Days

48

Count

Cnt Here/Apply Here

Other Coverage EP Counted For Days

0

49

50

Save

Close

FIG. 14

40

Plan Load

STEPS

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Plans

Formulas

Steps

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

ELIMINATION PERIOD

41

Type

Coverage

42

Per

Claim

44

Accumulates Toward

Limit

Non-Multiplier

47

Cov Instance

COVERAGE.ELIM_PERIOD

46

Satisfaction Period

48

Simple

Calculation

Coverage.Elim_Period

*

Claim_Cov.Hospital_Days

Count

Cnt Here/Apply Here

Other Coverage EP Counted For Days

0

Save

Close

FIG. 15

Plan Load

STEPS

Plans

Formulas

Steps

<p>Formula <input type="text" value="ABC"/></p> <p>Description <input type="text" value="Standard Testing"/></p> <p>STEP</p> <p>Section <input type="text" value="Primary"/></p>	<p>Begin Date <input type="text" value="2000"/></p> <p>End Date <input type="text" value=""/></p> <p>Section Step Seq <input type="text" value="4"/></p>	<p>ELIMINATION PERIOD</p> <p>Type <input type="text" value="Coverage"/> Per <input type="text" value="Claim"/> Accumulates Toward <input type="text" value=""/></p> <p>Limit</p> <p><input type="radio"/> Non-Multiplier <input checked="" type="radio"/> Multiplier</p> <p><input type="text" value="COVERAGE.ELIM_PERIOD"/> <input type="text" value=""/> <input type="text" value=""/></p> <p>Satisfaction Period</p> <p><input type="radio"/> Simple <input type="radio"/> Coverage.Elim_Period</p> <p><input type="text" value="COVERAGE.ELIM_PERIOD"/> <input type="text" value=""/> <input type="text" value=""/></p> <p>Count <input type="text" value="Cnt Here/Apply Here"/></p>
--	--	--

Other Coverage EP Counted For Days

FIG. 16

40

<div> <div>Plan Load</div> <div> <div>STEPS</div> <div> <div>3DAYHOSP 01/01/2000</div> <div>ABC 01/10/2000</div> <div>Primary</div> <div>PCT</div> <div>PWHEH</div> <div>EP</div> <div>MAX</div> <div>MAX</div> <div>MAX</div> <div>TOT</div> </div> <div>Standard</div> <div> <div>ACF50CA_C 01/01/2000</div> <div>ACF50CA_S 01/01/2000</div> <div>ACF60 01/01/2000</div> <div>ACF60_C 01/01/2000</div> <div>ACF60_S 01/01/2000</div> <div>ACF60CA 01/01/2000</div> <div>ACF60CA_C 01/01/2000</div> <div>ACF60CA_S 01/01/2000</div> <div>ACF7002 01/01/2000</div> <div>ACF7002_C 01/01/2000</div> <div>ACF7002_S 01/01/2000</div> <div>ACF80 01/01/2000</div> <div>ACF80_C 01/01/2000</div> <div>ACF80_S 01/01/2000</div> <div>ACF80CUSTOM 01/01/2000</div> <div>ACF80CUSTOM_C 01/01/2000</div> <div>ACF80CUSTOM_S 01/01/2000</div> <div>ACF80MN 01/01/2000</div> <div>ACF80MN_C 01/01/2000</div> <div>ACF80MN_S 01/01/2000</div> <div>ACFCA_C 01/01/2000</div> <div>ACFCA_S 01/01/2000</div> <div>ACFREIMB 01/01/2000</div> <div>ACFREIMB_C 01/01/2000</div> <div>ACFREIMB_S 01/01/2000</div> <div>ADC50000 01/01/2000</div> </div> </div> </div>		<div> <div>Formula</div> <div>ABC</div> <div>Begin Date</div> <div>2000</div> <div>End Date</div> <div></div> </div>	
<div> <div>Description</div> <div>Standard Testing</div> </div>		<div> <div>STEP</div> <div>Section</div> <div>Primary</div> <div>Step</div> <div>Max</div> <div>Section Step Seq</div> <div>4</div> </div>	
<div> <div>ELIMINATION PERIOD</div> <div>Type</div> <div>Coverage</div> <div>Per</div> <div>Claim</div> <div>Accumulates Toward</div> <div></div> </div>		<div> <div>Limit</div> <div>Non-Multiplier</div> <div>Multiplied</div> <div>Coverage.ELIM_PERIOD</div> </div>	
<div> <div>Satisfaction Period</div> <div>Simple</div> <div>Calculation</div> <div>Coverage.Elim_Period</div> <div>*</div> <div></div> </div>		<div> <div>Count</div> <div>Claim_Cov.Hospital_Days</div> <div>Other Coverage EP Counted For Days</div> <div>0</div> </div>	

FIG. 17

FIG. 18

FIG. 18

40

Plan Load		STEPS	
Plans		<input checked="" type="checkbox"/> 3DAYHOSP 01/01/2000	
Formulas		<input checked="" type="checkbox"/> ABC 01/10/2000	
Steps		<input checked="" type="checkbox"/> Primary	
		<input type="checkbox"/> PCT	
		<input type="checkbox"/> PWHEN	
		<input type="checkbox"/> EP	
		<input type="checkbox"/> MAX	
		<input type="checkbox"/> MAX	
		<input type="checkbox"/> MAX	
		<input type="checkbox"/> TOT	
		<input checked="" type="checkbox"/> Standard	
		<input type="checkbox"/> ACF50CA_C 01/01/2000	
		<input type="checkbox"/> ACF50CA_S 01/01/2000	
		<input type="checkbox"/> ACF60 01/01/2000	
		<input type="checkbox"/> ACF60_C 01/01/2000	
		<input type="checkbox"/> ACF60_S 01/01/2000	
		<input type="checkbox"/> ACF60CA 01/01/2000	
		<input type="checkbox"/> ACF60CA_C 01/01/2000	
		<input type="checkbox"/> ACF60CA_S 01/01/2000	
		<input type="checkbox"/> ACF7002 01/01/2000	
		<input type="checkbox"/> ACF7002_C 01/01/2000	
		<input type="checkbox"/> ACF7002_S 01/01/2000	
		<input type="checkbox"/> ACF80 01/01/2000	
		<input type="checkbox"/> ACF80_C 01/01/2000	
		<input type="checkbox"/> ACF80_S 01/01/2000	
		<input type="checkbox"/> ACF80CUSTOM 01/01/2000	
		<input type="checkbox"/> ACF80CUSTOM_C 01/01/2000	
		<input type="checkbox"/> ACF80CUSTOM_S 01/01/2000	
		<input type="checkbox"/> ACF80MN 01/01/2000	
		<input type="checkbox"/> ACF80MN_C 01/01/2000	
		<input type="checkbox"/> ACF80MN_S 01/01/2000	
		<input type="checkbox"/> ACFC_A_C 01/01/2000	
		<input type="checkbox"/> ACFC_A_S 01/01/2000	
		<input type="checkbox"/> ACFFREIMB 01/01/2000	
		<input type="checkbox"/> ACFFREIMB_C 01/01/2000	
		<input type="checkbox"/> ACFFREIMB_S 01/01/2000	
		<input type="checkbox"/> ADC50000 01/01/2000	

Formula <input type="text" value="ABC"/>		Begin Date <input type="text" value="2000"/>	End Date <input type="text"/>
Description <input type="text" value="Standard Testing"/>			
STEP			
Section <input type="text" value="Primary"/>	Step <input type="text" value="Max"/>	Section Step Seq <input type="text" value="4"/>	
ELIMINATION PERIOD			
Type <input type="text" value="Coverage"/>	Per <input type="text" value="Claim"/>	Accumulates Toward <input type="text"/>	
Limit			
<input checked="" type="radio"/> Non-Multiplier	<input type="radio"/> Multiplier		
<input type="text" value="COVERAGE.ELIM_PERIOD"/>			
Satisfaction Period			
<input type="radio"/> Simple	<input checked="" type="radio"/> Calculation		
<input type="text" value="Coverage.Elim_Period"/>			
Count <input type="text"/>			
Other Coverage EP Counted For Days <input type="text" value="0"/>			
Cnt Here/Apply Here			
Cnt Here/Apply Elsewhere			
Save			
Close			

FIG. 19

40

Plan Load

STEPS

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

ELIMINATION PERIOD

Type

Benefit

Per

Cov Instance

41

Accumulates Toward

44

Limit

NONE

ACF

ACFCA

AD

ADC

ADCB

ALCF

Non-Multiplier

Multipler

COVERAGE.ELIM_PERIOD

47

Satisfaction Period

Simple

Calculation

Coverage.Elim_Period

48

Claim_Cov.Hospital_Days

Count

49

Other Coverage EP Counted For Days

0

Save

Close

FIG. 20

FIG. 21

FIG. 21

60

Plan Load

STEPS

ABC

Standard Testing

STEP

Section

Primary

Section Step Seq

4

Formula

ABC

Begin Date

2000

End Date

PERCENT

Percent To Pay

50

Step

Max

Save

Close

Plans

Formulas

Steps

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

FIG. 22

BIO Max Age: 85

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Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEH

EP

MAX

MAX

TOT

PWHEH

PWHEH

EP

TOT

EP

MAX

PCT

PWHEH

PWHEH

EP

TOT

Own

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

Formula ABC

Begin Date 2000

End Date

Description Standard Testing

STEP

Section Primary

Step TOT

Section Step Seq 4

TOTAL

Non-Multiplier

7

72

Indemnity Amount

73

BIO Type

74

Per

75

Multiplied

20

COVERAGE.ORIGINAL_BENEFIT

76

BIO Interest

77

BIO Compounding Period

78

Save

Close

FIG. 24

"INSURANCE INFORMATION MANAGEMENT SYSTEM AND METHOD"
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Plan Load	STEPS	Formula	Begin Date	End Date
Plans	3-DAYHOSP 01/01/2000	ABC	2000	
Formulas	ABC 01/10/2000			
Steps	Primary			
	PCT			
	PWHEN			
	EP			
	MAX			
	MAX			
	TOT			
	PWHEN			
	PWHEN			
	EP			
	TOT			
	EP			
	PCT			
	PWHEN			
	PWHEN			
	EP			
	TOT			
	Own			
	ACF50CA_C 01/01/2000			
	ACF50CA_S 01/01/2000			
	ACF60 01/01/2000			
	ACF60_C 01/01/2000			
	ACF60_S 01/01/2000			
	ACF60CA 01/01/2000			
	ACF60CA_C 01/01/2000			
	ACF60CA_S 01/01/2000			
	ACF7002 01/01/2000			
	ACF7002_C 01/01/2000			
	ACF7002_S 01/01/2000			
	ACF80 01/01/2000			
	ACF80_C 01/01/2000			
	ACF80_S 01/01/2000			
	ACF80CUSTOM 01/01/2000			

Section	Step	TOT	Section Step Seq
Primary			4

TOTAL	
<input type="radio"/> Non-Multiplier	<input checked="" type="radio"/> Multiplier
Indemnity Amount	72
BIO Type	Compound
Per	Day
BIO Interest	5
BIO Compounding Period	74
BIO Max Period	20
BIO Max Age	78

COVERAGE.ORIGINAL_BENEF	
Annually	76
Annually	75
Every Other Year	77
Semi-Annually	78
Quarterly	
Monthly	

Save	Close
------	-------

FIG. 25

Plan Load		STEPS		Formula		Begin Date		End Date	
ABC 01/10/2000		ABC 01/10/2000		ABC		2000			
PCT		PCT		Standard Testing					
PWHEN		PWHEN		STEP					
EP		EP		Section		TOT		Section Step Seq	
MAX		MAX		Primary				18	
MAX		MAX							
TOT		TOT							
PWHEN		PWHEN							
PWHEN		PWHEN							
EP		EP							
TOT		TOT							
EP		EP							
MAX		MAX							
PCT		PCT							
PWHEN		PWHEN							
PWHEN		PWHEN							
EP		EP							
TOT		TOT							
OWN		OWN							
ACF50CA_C 01/01/2000		ACF50CA_C 01/01/2000							
ACF50CA_S 01/01/2000		ACF50CA_S 01/01/2000							
ACF60 01/01/2000		ACF60 01/01/2000							
ACF60_C 01/01/2000		ACF60_C 01/01/2000							
ACF60_S 01/01/2000		ACF60_S 01/01/2000							
ACF60CA 01/01/2000		ACF60CA 01/01/2000							
ACF60CA_C 01/01/2000		ACF60CA_C 01/01/2000							
ACF60CA_S 01/01/2000		ACF60CA_S 01/01/2000							
ACF7002 01/01/2000		ACF7002 01/01/2000							
ACF7002_C 01/01/2000		ACF7002_C 01/01/2000							
ACF7002_S 01/01/2000		ACF7002_S 01/01/2000							
ACF80 01/01/2000		ACF80 01/01/2000							
ACF80_C 01/01/2000		ACF80_C 01/01/2000							
ACF80_S 01/01/2000		ACF80_S 01/01/2000							
ACF80CUSTOM 01/01/2000		ACF80CUSTOM 01/01/2000							

TOTAL		Non-Multiplier		Multiplier	
Indemnity Amount		7		COVERAGE: ORIGINAL_BENEF	
BIO Type		72		BIO Interest	
Per Day		73		BIO Compounding Period	
Day		74		BIO Max Age	
Service		76		BIO Max Period	

Save

Close

FIG. 26

TOT	Indemnity Amt: Coverage.Original_Benefit_Amt	Per: Day
	BIO Type: Compound	BIO PCT: 5% BIO Max Period: 20
	BIO Compounding Period: 12 Months	BIO Max Age: 85
PCT	100	
EP	Type: Coverage	Per: Claim
	Limit: Coverage.Elim_Period (Non Multiplier)	
	Satisfaction Period: 3 Times (Simple)	
	Count: Count Here/Apply Here	
MAX	Type: Coverage	Per: Lifetime
	Limit: Coverage.Original_Benefit_Amt * Coverage.Max_Days_Payable	Units: Dollars
	BIO Type: Compound	BIO Interest: 5% BIO Max Period: 20
	BIO Compounding Period: Annually	BIO Max Age: 85

FIG. 27

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ACF50000 01/01/2000

Formula ABC

Begin Date 2000

End Date

Description Standard Testing

STEP

Section Primary

Step PWHEN

Section Step Seq 9

PERFORM WHEN

Section 82

Condition

SOL

Primary

Standard

Privileged

A

B

Default Condition

Save

Close

FIG. 28

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ACF50000 01/01/2000

Formula ABC

Begin Date 2000

End Date

Description Standard Testing

STEP

Section Primary

Step PWHEN

Section Step Seq 9

PERFORM WHEN

Section

Condition

SOL

Default Condition

True

==

<

>

==

<

>

Save

Close

FIG. 29

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Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ACF50000 01/01/2000

Formula Begin Date End Date

Description

STEP

Section

Step

Section Step Seq

PERFORM WHEN

Section

☒ Condition

☐ SOL

Default Condition

Save

Close

FIG. 30

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ACF50000 01/01/2000

Formula ABC

Begin Date 2000

End Date

Description Standard Testing

STEP

Section Primary

Step PWHEN

Section Step Seq 2

PERFORM WHEN

Section Primary

Condition

SOL

Select....

Default Condition

Save

Close

FIG. 31

Perform/When	Section: Privileged Condition: POC.Priv_Care_Ind = True
Perform/When	Section: Own Condition: POC.Priv_Care_Ind = False
<ul style="list-style-type: none">● The rest of this Benefit formula is just like doing two formulas:<ul style="list-style-type: none">» One for Privileged Plan of Care and» One for Own Plan of Care	

FIG. 32

Section Privileged:

PCT 100

EP Type: Coverage Per: Claim
Limit: Coverage.Elim_Period (Non Multiplier)
Satisfaction Period: 3 Times (Simple)
Count: Count Here/Apply Elsewhere

MAX Type: Coverage Per: Week Units: Dollars
Limit: 7 * Coverage.Original_Benefit_Amt (calculated)
BIO Type: Compound BIO Interest: 5% BIO Max Period: 20
BIO Compounding Period: Annually BIO Max Age: 85

MAX Type: Coverage Per: Lifetime Units: Dollars
Limit: Coverage.Original_Benefit_Amt * Coverage.Max_Days_Payable
BIO Type: Compound BIO Interest: 5% BIO Max Period: 20
BIO Compounding Period: Annually BIO Max Age: 85

FIG. 33

Section Own:		
PCT	80	
EP	Type: Coverage	Per: Claim
	Limit: Coverage.Elim_Period (Non Multiplier)	
	Satisfaction Period: 3 Times (Simple)	
	Count: Count Here/Apply Here	
MAX	Type: Coverage	Per: Day
	Limit: Coverage.Original_Benefit_Amt	Units: Dollars
	BIO Type: Compound	BIO Interest: 5%
	BIO Compounding Period: Annually	BIO Max Period: 20
		BIO Max Age: 85
MAX	Type: Coverage	Per: Lifetime
	Limit: Coverage.Original_Benefit_Amt * Coverage.Max_Days_Payable	Units: Dollars
	BIO Type: Compound	BIO Interest: 5%
	BIO Compounding Period: Annually	BIO Max Period: 20
		BIO Max Age: 85

FIG. 34